# THE

# BOSTON MEDICAL AND SURGICAL JOURNAL.

EDITED BY

J. V. C. SMITH, M.D.

WEDNESDAY, DECEMBER 24, 1851.

Vol. XLV. No. 21.

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MASSACHUSETTS MEDICAL SOCIETY.—
Massachusetts, Medical Society will be held, by order
of the President, at their room in the Masonic Temple, Iremont street, on Monday, December 29th, at
10 clock, A.M.—CHAS. E. WARE, Rec. Sec.
D17—24.

NOTICE TO PHYSICIANS AND THE PUBLIC GENERALLY.—The subscriber, aware of LIU GENERALLY.—The subscriber, aware of ing Drucs and Astricians for the unriver and their difficulty experienced in distinguishing the pure, has arranged to have most of these articles powdered in his establishment. Samples of drugs in their original state will be kept for comparison, and he has request-time such preparations as may appear of doubting suring to physicians pure drugs and medicines.

N. B.—With a show a mrangement all can be supplied with the above arrangement, and see samples of pure drugs and medicines. No one allowed to put up prescriptions except those of long experience and perfect masters of their profession. Grounder of the profession of Boston and vicinity are invited to call and examine the above arrangement, and see samples of pure drugs and medicines. No one allowed to put up prescriptions except those of long experience and perfect masters of their profession. Grounder of the profession of Boston and sum on that day.

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MEDICAL SCHOOL OF MAINE.—The Medical Lectures at Bowdoin College will commence on Wednesday, the 11th day of February, 1822.

Theory and Practice of Medicine, by William Sweeters, Moscomy and Surgery, by Ennux B. Pearler, Anatomy and Surgery, by Ennux B. Pearler, Obstetries and Discense of Women and Children, by ANOS NOURE, M.D. Materia Medica and Therapeutics, by Charles A. Ler, M.D. Chemistry and Pharmacy, by Parker Cleave-

Chemistry and Pharmacy, by PARKER CLEAVE-LAND, M.D.
Medical Jurisprudence, by Hon. John S. Tenney,

Medical Jurisprudence, by Hon. JOHN B. TENETY,
M.A.
The Library, containing about 3400 volumes, principally modern works—and the Anatomical Cabinet,
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the principal program of the State of the State
Every person becoming a member of this institution, is required previously to present satisfactory
evidence of possessing a good moral character.
The annount of text for the Lectures of Stip, paysThe annount of text for the Lecture of Stip, paysBis. The Lectures continue fourteen weeks.
Degrees are conferred at the close of the Lecture
Term in May, and at the following Commencement
of the College in September.
Brunswick, Nov. 1831.

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Brunnieck, Nov. 1801.

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will commence on the first of September, 4851. Its
object is to give as complete a course of instruction
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be given in this country in a period of three years.
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School in the country, and with the advantages held
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HENNY G. CLARK, M.D., one of the Surgeons of the Massachusetts General Hospital, Instructer in Pathology and Lexal Medicine.

HENNY G. CLARK, M.D., one of the Surgeons of the Massachusetts General Hospital, Instructer in Principles and Practice of Surgery, 35 Salem street.

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WINSLOW LEWIS, President.

Boston, Aug. 34, 1831.

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LLIXIR OF OPIUM—Made from the formula of the Philadelphia Journal of Pharmacy, and is intended to be a substitute for the "popular" incircine called McMunn's Elixir. This is a preparation of Opium without Narcotine, and the strength is the same as Thet. Opil. Manufactured by PHILBRIGE, CARPENTER & CO. Successors to PHILBRIGE & TAPPON, Chemists. July 26.

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## THE

# BOSTON MEDICAL AND SURGICAL JOURNAL.

Vol. XLV. WEDNESDAY, DECEMBER 24, 1851. No. 21.

#### OVARIAN DROPSY.

ATTEMPTED REMOVAL OF THE CYST BY THE SMALL ABDOMINAL INCISION, PROVING UNSUCCESSFUL FROM THE ABSENCE OF A PEDICLE—RECOVERY.

[Read before the Suffolk District Medical Society by S. Parknan, M.D., one of the Surgeons of the Massachusetts General Hospital.]

Mas. D., aged 41, placed herself under my care at the Hospital, Aug. 12, 1851, for the examination and treatment of an abdominal tumor. She is of the medium stature, and of a thin habit of body and sallow complexion. She was first married at the aged of 21, and had one child within a year. She then had two miscarriages, and after the loss of her husband, was, after the lapse of several years, married again, and has had one child since. Her general health has always been good, and the catamenia regular, except that within the last year and a half, since the formation of the tumor, their appearance has been preceded for several days by severe bearing-down pains, which have continued after their cessation.

The history of the growth of the tumor was as follows. Sixteen months previous to my seeing her, in the month of June, she first perceived a "bunch" in the left iliac fossa, and soon after experienced sensations similar to those caused by motion. She considered herself pregnant, and her opinion was confirmed by the fact that she had had morning nausea in the spring preceding. This swelling advanced as in pregnancy, and she made her preparations to be confined in November. This time, however, passed by, and the motions still continuing, she considered herself to have made a false reckoning. In January she was seized with intermitting bearing-down pains, which she regarded as the commencement of labor. Her physician, Dr. Salisbury, of Medway, was sent for, who undeceived her, and informed her of the existence of an ovarian tumor. At this period she was ill for some time, and Dr. Salisbury has informed me that she had symptoms of ovaritis of the right side in addition to the tumor of the left. From this she recovered, and resumed her usual avocations, the abdomen still continuing enlarged as of a woman in the seventh month. She described herself principally embarrassed by the weight of the tumor, pain in the back, a general sense of uneasiness over the abdomen, and a frequent desire for micturi-

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tion. Her object was to have an opinion on the nature of the disease,

its prognosis and treatment.

An examination by the eye, of the naked abdomen, with the patient lying on her back, showed an enlargement rising nearly to the ensiform cartilage. The form of this enlargement was worthy of note. It did not distend or protrude the false ribs, but appeared to cease before arriving at them. There was also some appearance as if the tumor might be lobulated. These lobes were large, and only three in number; they were not well marked, however. The skin of the abdomen was smooth and without marks of distension. The most prominent part of abdomen was about umbilicus. Examined by the hand, the tumor was felt readily moveable; that is, it could be swayed from side to side, like a body nearly filling the abdominal cavity. There was a universal fluctuation over the whole tumor, but the sensation was that of fluid closely confined. In the right iliac fossa there was an obscure feeling on deep pressure of the presence of a solid body. This, however, was not well defined. There was dulness over the whole abdomen, except in the epigastrium and the right and left lumbar regions.

A vaginal examination showed the mouth and neck of the uterus natural in size, &c., and pressure upon these parts appeared to have no

influence upon the abdominal tumor.

The examination thus far conducted appeared to me to establish the existence of a certain quantity of fluid in the cavity of the abdomen, and, that this was contained within a cyst, seemed indicated by the peculiar shape of the tumor; by its being confined to the lower portion of the abdomen, and having no tendency to extend under the ribs when the patient was lying on the back; by the swaying motion that could be given to the tumor; and more especially by the closeness with which the fluid appeared confined, without any marked tension of the abdominal walls, as there certainly would be if the fluid were confined solely by them. The signs thus far seemed certainly to indicate an ovarian tumor containing fluid. It remained to determine whether the tumor was unilocular or composed of several cysts, and also the probable amount of solid matter that entered into its composition. This could only be done by an evacuation of its contents. Mrs. D. being somewhat fatigued by this examination, further research was postponed until the next day.

To assist in the diagnosis, and to give the patient the benefit of their advice as regards the treatment of the case, I called a consultation, for August 13th, of Drs. Perry and Storer, the attending physicians at the Hospital at that time; and of Drs. Townsend, J. M. Warren and Clark, my surgical colleagues in the institution. After a separate examination made by each of these gentlemen, I proceeded to puncture the abdomen, midway between the umbilicus and the pubis, the patient sitting on the edge of the bed. This operation gave issue to three and a half quarts of a darkbrown, somewhat glutinous fluid, which a further examination showed to be of the specific gravity of 1012, and under the microscope to be rich in crystals of cholesterine. After the evacuation of the fluid the tumor entirely disappeared, except that there was from deep pressure an

obscure sensation of hardness in the left iliac fossa. There was no indication of the walls of a cyst.

As the result of the examination, it appeared clear to the minds of the gentlemen who had been consulted that the disease was an ovarian dropsy of the left side, that the fluid was contained in a single cyst, and that the bulk of the tumor was fluid, with but little solid substance; and it was decided that an operation was justifiable, provided the patient should so elect, after a full and complete statement of the dangers consequent upon it should be made to her. After the consultation, I saw the patient and found her very comfortable, except from some uneasy sensations in the abdomen which might be expected from the removal of the pressure to which she had been so long accustomed.

In the evening the House Pupil was called to her, and found her insensible, with eyes fixed and staring, respiration natural, however, and pulse 64—the nurse reporting that she had made considerable complaint of pain in back and abdomen. She gradually came out of this condition, but complained of great pain in the above-mentioned situations, which were likewise tender upon pressure. He suspected the attack to be hysterical in its character, but as a precaution applied six leeches to the abdomen, and afterwards a liniment of turpentine and oil.

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The next morning, Aug. 14th, I found her still complaining of pain; the pulse, however, 64 and feeble. The general aspect convinced me that the attack was hysterical, and that there were no inflammatory symptoms. She was ordered tr. valerian, and the next day she was up and dressed. She remained in the Hospital until Aug. 19th, experiencing a considerable amount of uneasy sensation in the abdomen, not exactly pain, but sufficient to keep her constantly conscious of her situation. She was, however entirely free from the frequent desire for microin, which she had experienced before the tapping, and which was evidently due to the pressure upon the bladder. Examining the abdomen this day, some enlargement since the tapping could be readily perceived, and a tumor occupying the lower portion on each side of the median line could be felt, reaching higher on the left than on the right side. This tumor is not hard, but gives the sensation of a cyst partially full. There is flatness over the tumor.

It having been decided that Mrs. D. should return to her friends, she was furnished with the following opinion to guide them and herself in their decision as regards the course she should pursue. I subjoin a copy of this opinion, that it may be seen that the case was fully understood.

"The following is my opinion in the case of Mrs. D.

"Her disease is ovarian dropsy. There are two alternatives.

"1st. To leave the disease to itself, tapping the tumor from time to time as it increases and the pressure becomes insupportable.

"2d. To remove the tumor by an operation.

"If the first alternative be adopted, it is not probable that the constitution would contend against the disease for a longer period than four years. The operations of tapping would require to be more and more frequent, as the tumor would become sooner and sooner filled after each

successive one, and of course there would be a certain amount of danger

from inflammation after each time.

"If the second alternative be contemplated, the risk of the operation should be fairly understood. This, as nearly as can be estimated, is as one in three—179 cases having been recorded, and of these 59 have died. This number 179 includes, however, some unfavorable cases, as well as some where the character of the tumor was uncertain or mistaken for want of the accurate means of investigating employed at the present day. To balance this, however, it is probable that a certain number of unsuccessful cases have not been reported. All these circumstances considered, the risk may safely be estimated at not greater than one in three.

"In this case there are favorable circumstances which are deserving of note, viz.: The good health and good constitution of Mrs. D. The tumor being probably composed of a single cyst, without any large amount of solid substance, the disease can most likely be removed by a small incision, and the operations performed in this way have been more

successful.

"If, after a careful consideration of the above, by Mrs. D. and her friends, it shall be decided that an operation should be performed, I should consider the earlier it was done the more favorable result might be anticipated. (Signed) S. PARKMAN."

be anticipated. (Signed) S. PARKMAN."
Furnished with this opinion, Mrs. D. left for her home, whence she returned August 25th, informing me that she had made up her mind to have an operation performed. She stated that she fully understood the subject, in all its bearings. I also received notes from Dr. Salisbury of Medway, and Dr. Patch of Canton, informing me that the matter had been discussed by the friends of Mrs. D. in their presence, and that they were sure that the risks and dangers were fully comprehended by all parties.

I examined her abdomen on the day of her return, and found no change worthy of note from the appearances of Aug. 19th. Now that her mind was decided upon the subject of the eperation, I considered it perfectly proper to tell her, as an encouragement, that her case appeared one presenting all the circumstances most favorable to success.

My diagnosis may be stated as follows. There is good evidence for believing that the tumor is ovarian, composed of a single cyst, without much solid substance; whether its surface is free or adherent, whether pediculated or not, it is of course as impossible to predict in this case as it is in every one of the kind. The uncertainty which must exist upon these points, is to be reckoned in the chances for or against the success

of the operation.

The operation I proposed for myself was as follows:—to open the abdominal cavity from the umbilicus to the pubis; to seize the cyst, drag it through the opening, evacuating its contents if necessary; to tie the pedicle and remove the tumor. If the tumor should prove adherent, and there should seem a fair prospect of separating these adhesions, I might, if necessary for the manipulation, extend the incision. If from the too intimate adhesions, or the absence of a pedicle, or any other

cause, it should be found impossible to remove the tumor, I should then have only a small opening into the cavity, and there would be no great exposure of the intestines.

The operation was fixed for Saturday, August 30th, and in the mean time the patient was removed from the public ward into a private room, her diet restricted to gruel, bread and tea, and a purgative of castor oil directed thirty-six hours before the time fixed for the operation.

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Aug. 30, at 11½ A. M., the operation was performed in the presence of the medical students attending the Hospital, and a number of medical gentlemen who had been attracted to witness it.

The patient being placed completely under the influence of sulphuric ether, an incision was made from one inch below the umbilicus to the pubis, through the skin and cellular tissue. The linea alba was carefully dissected, but the attempt to open the abdomen without exposing the recti muscles was not successful, from their close contact. The abdominal cavity was opened about midway in the external incision, and the walls being raised the section was completed. A small knuckle of intestine protruded, which was easily returned and retained by Dr. J. M. Warren, who lent his valuable assistance. Passing the forefinger and thumb of my right hand into the opening, I immediately detected the firm fibrous walls of the sac, flaccid from the previous evacuation of its contents. This I readily pulled to the surface of the abdomen, so that I could distinguish it with the eye, but the resistance that was offered showed at once that it was firmly fixed. I then passed my whole hand into the cavity, and found that the entire surface of the cyst was free, but that at its base there was no appearance of a pedicle. The peritoneum seemed to pass over it as it ordinarily does over the caput coli, instead of over the small intestine.\* This condition of things being confirmed by Dr. J. M. Warren, who likewise passed his hand into the abdomen, I decided to close the wound, leaving the cyst untouched. The wound was closed by a suitable number of simple interrupted sutures, say an inch and a half apart, passing through the whole thickness of the walls except the peritoneum, and the skin between them was brought together by other ones passing only through its thickness. Strips of adhesive plaster, with a warm moist compress, completed the dressing. No arteries required ligature, and little if any blood found its way into the abdominal cavity. The patient was then conveyed to her bed, perfect quiet enjoined, the knees supported by pillows, and heaters applied to the feet. The catheter was directed to be passed every four hours, to prevent any straining in the evacuation. The day being cool, the temperature of the operating theatre had been raised to 75° F. at the commencement of the operation, and it was directed that the room should be kept about the same. The time, from the beginning of the operation until the patient was arranged in bed, was three quarters of an hour.

<sup>\*</sup> The growth of a tumor of this kind without a pedicle, and in the manner described, will be evident from a little consideration. The healthy ovary floats loosely, restrained by the fold of peritoneous called the broad ligament. When it enlarges in the usual manner, it grows upward, as it were, and the broad ligament is the pedicle of the tumor. If, on the contrary, it grows downward, it separates the folds of the bread ligament and obliterates it and there is no pedicle.

The following is the record which is taken from the Hospital books, giving the symptoms at short intervals. Mrs. D. was very carefully watched by Dr. Bunstead, the House Pupil at the time, who remained after his term of service had expired, that there might be no change in the

attendance.

12½ o'clock.—The effects of the ether were still present. Pulse 84. Desired to have urine drawn off. 2 o'clock.—Pulse 75, and natural; no chill; skin warm; an occasional sharp pain in abdomen. 4½, P. M. Pulse 76. Pain in abdomen more severe. No oozing from wound. No tympanitis. R. McMunn's elixir opii, gtts. xxx. 5½, P. M.—Pulse 72; continuance of pain. Repeat opiate, gtts. xx. 7½, P. M.—Pulse 76, a little fuller; pain somewhat relieved; has slept an hour. 9½, P. M.—Pulse 84; rather restless; some nausea; no vomiting; an occasional sharp cutting pain through abdomen; uneasy sensations in back. Repeat opiate, gtts. xxx.

Aug. 31st, 2, A. M., 14 hours after the operation.—Pulse 66. Skin warm and moist. 8, A. M.—Pulse 76, of moderate fulness; edges of wound glued together; no cozing; no tympanitis. Has dozed at intervals during the night. No chill. The occasional darting pain through abdomen continues. May have balm or sage tea. 12, M.—Pulse 72. Has taken a cup of tea. 7, P. M.—Has dozed most of the afternoon.

Pulse 75; feels comfortable.

Sept. 1st, 8, A. M.—Night passed comfortably; slight pain at intervals, as previously; no oozing from wound; abdomen supple and natural in appearance. 12, M.—Pulse 76, as before. May have gruel, § ij.

From this time, forty-eight hours after the operation, there were no symptoms that require a minute report. The pulse continued about the number usually stated above, varying from 75 to 85, except that on the Wednesday morning after the operation they were reported at 96, which was attributed to some motion of the patient for the purpose of changing her clothes. They soon returned to their usual number. On this day I renewed the strips of adhesive plaster, and divided the lower-most suture, as there was some tumefaction at the part of the wound involving the mons veneris. Patient moved herself with freedom, and was found during this day on her side.

On Thursday I removed all the sutures from the wound, which was united throughout except a little superficial suppuration at the lower ex-

tremity in the cellular tissue of the mons.

On Friday the bowels were gently moved by two doses of oil and lemon juice, 5 j. each, with ten drops of laudanum. On Saturday she was allowed soda biscuit and beef tea, and on Sunday she had a small piece of steak. On Sept. 12th, fourteen days from the operation, she sat up; and Sept. 16th, eighteen days from the operation, she went out of doors, and for all practical purposes might be considered as well. She remained in the Hospital until the 22d of September, when she left for her home. At her departure the abdomen was natural in its appearance. Examined by the hand, however, a resistance could be detected at the lower portion, as if from the presence of some soft foreign body. The sac had not yet shown any disposition to refill.

The fact of the impossibility of removing the tumor not having been revealed to Mrs. D., although her friends had been made aware of the nature of the case, I judged it better not to undeceive her. Certainly some effect had been produced by the operation, as she firmly persisted that she was entirely relieved of the many very distressing abdominal sensations, which she had experienced not only before the tapping of the cyst, but between that time and the final operation. It is possible, though not probable, that the cyst will not refill.

Oct. 30th.—Two months form the day of operation Mrs. D. returned to the Hospital for an examination. She described herself as experiencing tolerably good health, though suffering somewhat from a recurrence of the old pain in the abdomen. When dressed there did not appear any enlargement of the abdomen. Examined, lying on the back, the abdomen uncovered, there was an evident appearance of the refilling of the cyst, although the walls of the abdomen were still flaccid, and no fluctuation could be distinguished. The sensation was rather that

of a general fulness of the cavity than anything else.

This case, though unsuccessful, is still not without interest in several points. In the first place the failure was due to a condition, the presence of which it would have been impossible to foretell. We have not to regret an error in diagnosis. On the contrary, this was perfectly well made out, and proved, as regards all the points upon which it was possible. The tumor was diagnosed as ovarian, encysted, unilocular, and without much solid substance; and such it proved to be. The existence or non-existence of a pedicle, like the presence or absence of adhesions, must with our present means of investigation remain wrapped in obscurity—and this obscurity adds another chance to be considered in estimating the risk of an operation. In the second place the slight degree of constitutional re-action to the shock of, and the rapid recovery from, an operation so grave as an opening of the abdominal cavity and passing the hand into its interior, is worthy of note. The patient cannot really be said to have had any febrile excitement whatever. This may be attributed either to her excellent constitution, or to the care with which she was both prepared for, and watched after, the operation. The fact, however, only causes the more regret that in a case so exactly adapted for the operation, there should have been the ill-luck of the non-existence of a pedicle, as the presence of a ligature in the abdominal cavity might not have added much to the gravity of the case and its symptoms.

Boston, Dec. 15, 1851.

# FEVERS, &c., IN SUFFOLK COUNTY, N. Y.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—I have been much interested with an article in one of your late numbers, on that old subject, fever. Though old to some, it is new and interesting to many in these days, in which there is an almost entire change in the habits and manner of living, from that of people twenty

or thirty years ago. The perusal of the article alluded to has induced me to send you a few notes on the forms of fever found in this part of the State. I would refer more particularly to the southern branch of this isle of the sea, which is some fifty miles in extent, and varying in breadth from six to eight. A line of hills, ranging in height from thirty to one hundred feet above the level of the sea, extends, with few interruptions, the whole length. To the south of these hills there is a plain, of as fine a soil for agriculture and grazing as any in the State, extending to within a few rods of the sea. Along the southern border of this plain there are small bays and ponds of water, which receive their increase from springs or rivulets, and during the months of autumn from the overflow of the sea. Some of these have outlets, but the major part have none but artificial ones made by the inhabitants in the spring, and leaving much vegetable matter to be acted upon by the sun. During the spring and autumn there are frequent changes from land to sea breeze, which are not considered beneficial to health. The occupation of the people is principally agriculture, much that tends to enrich the soil being obtained from the sea.

The prevailing fevers may be classed—intermittent, typhoid and remittent, complicated with bronchial affections involving the pleura and neighboring membranes. In the spring months, pneumonia prevails; and as the seasons advance we have remittent fever, with all its complications attendant on sea and land air intermingled. It does not seem to prevail as an epidemic, but rather as an endemic, once in six or eight years. During the other years, one or two of them is marked with a number of bad cases of dysentery and diarrhœa. Continued fever may be seen with both states of the bowels. Intermittent fever is rarely seen. It formerly prevailed to some extent. A form of nervous fever, of which your correspondent writes, is seen quite often, coming on in the morning, and disappearing after mid-day. Here, it is supposed to arise from some hepatic difficulty; and when alteratives have affected the

system, and mild tonics are used, it soon disappears.

A form of remittent fever running into typhoid has prevailed in this vicinity during the last two months, and exists at the present time, similar in many respects to your correspondent's description. Bronchial affections prevail at the same time to a considerable extent, and in some cases run fairly into pneumonia, and call for the most active antiphlogistic treatment, except bloodletting, which is not borne well by those

living near the sea.

For the remittent fever, the remedies spoken of by your correspondent have been used with much success, though the mildest form of mercury has had the best effect. There has been but little difficulty about the head, some patients remarking they never had so little headache before when sick. There seems to be a peculiar idiocrasy of the people here—viz., they do not bear the usual quantity of medicine, or that which is well borne by the inhabitants of the main; and if the physician is not on his guard, he is causing a new disease in the system.

Within a few days the following case has occurred. Miss -------, et. 64, of full habit and general good health, but who within a few days

had complained of a dull pain in the right side, with some swelling, had been rather costive for two weeks. During the summer she had a slight turn of diarrhœa. On the morning of the 2d inst. she went from a moist warm air to a cold one, to hang out clothes that had been recently washed. She returned to the warm room, and half an hour afterwards was found lying prostrate on the floor. The right side of the body had become completely paralyzed. Her hearing was distinct, and she was conscious of passing events, but had lost the use of the vocal organs. Tongue coated with dark yellow fur. Bowels inactive, and not moved without medicine. The secretion of urine deficient, thick and high colored, with sediment. Not any improvement in the case up to the present time.

#### Suffolk County, Dec., 1851.

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#### CASES OF CROUP.

## BY A. B. CLARKE, M.D., HOLYOKE, MASS.

[The following extract from a letter on croup, to a practitioner of this city, was read at the last meeting of the Suffolk District Medical Society, and excited some considerable discussion concerning the important questions which are suggested in relation to the propagation and treatment of this disease.]

\*\*\*\* I herewith send you a short account of two or three cases of membranous croup, occurring in my practice in July and August of 1850. I had seen and treated croup of the other forms, but never anything like these. I was called to see a little girl, six years of age, light hair, fair complexion, and rather delicate make. She had been treated by a "botanic doctor" for three days previously. She was up and about the house, but complained of sore throat. There was a thickness of the voice, as in tonsillitis. On examining the throat, the tonsils were found somewhat enlarged, and covered with a thick layer which appeared to me to be membranous. I treated it with external applications and nitrate of silver; internally, with small doses of cal., ipecac. and opii. Every day the false membrane could be seen creeping down the fauces towards the larvnx, till the whole back part of the throat was covered. The true symptoms of croup set in; loss of voice preceded the croupy cough. I will not describe the symptoms. She grew rapidly worse, and died on the day following the night when the parents first noticed the croupy symptoms, and on the sixth day of my attendance.

Seven days after the child died, I was taken with sore throat and the same appearance of tonsils. For myself, strong cauterization and slight ptyalism soon effected restoration; but in just seven days from the attack, dating from the commencement, my only son was taken with the same disease—a boy of five and a half years. It followed the usual process in this disease. It was four days before the croupy symptoms set in. Entire loss of voice preceded the peculiar croupal cough for two days. He was able to play part of the time on the bed until the two

last days, and he lived nine days from the commencement of the disease. He expectorated the false membrane, and I had great hopes, after that, he would live; but crepitation was heard over a great extent of the lungs, the pulse increased to 140, and he sank. I had great difficulty in the local application of the nitrate of silver, and relied mainly on calomel, with the inhalation of vapor and the warm bath.

In just seven days from the time he was taken, my wife, and only remaining child, a little girl, were taken with the same disease. My wife's yielded in the same manner and under the same treatment as my own. The little girl I blistered from ear to ear, and I never saw such effects from a blister. Masses of tough fibrinous matter hung under the throat, looking like the same membranous substance in the throat of the others. Her voice became extinct, but no other croupy

symptoms set in, and she slowly recovered.

Now, one object in writing this, is to get an expression of opinion in regard to two or three points connected with this subject. And, 1st. Have you seen this disease under circumstances when you thought it might have been propagated by contagion? My son was a favorite child; he always slept with his arms around my neck, and would be very likely to inhale my breath. No scarlet fever prevailed here; yet the seven days interval in each case has made an impression on my mind that this form may be under certain circumstances contagious. 2d. May the resolution of the disease in the little girl be attributed to the effects of the blister? It was laid on early, as soon as I saw the membranous aspect of the tonsils and fauces, and very little else was done. You may be inclined to say it was the absence of antiphlogistics; but I did not use depletion in either of the other cases. There was no indication for active antiphlogistic treatment; the action seemed rather below the standard. 3d. In the adult cases, was not the further progress of the disease prevented by the absence of that predisposition that exists, in childhood, for inflammation of the larynx and trachea?

Nov. 25, 1851.

#### ELECTRIC PENDULUM-ALLEGED DISCOVERY BY A HOMOEOPATHIST.

To the Elitor of the Boston Medical and Surgical Journal.

SIR,—The following communication from an English paper (the Christian Times) is of considerable importance, as well as curious, if true, and I send it to you for insertion in your Journal, that it may fall under the eye of those who are competent to verify or prove the falsity of the assertions it contains.

All at once a discovery is made of an instrument of such surpassing delicacy of construction and operation, that the inventor has been enabled to indicate not only the normal effects of the different electrical currents which exist in the body, but likewise a variety of modifications and changes which those currents undergo, when the hand of the operator is brought into contact with another person, with inanimate mat-

ter, with different metals, and with vegetable and animal substances, also to detect the alterations which different medical substances produce upon these currents.

There is no description of the instrument in the paper alluded to, but it goes on to say that the phenomena described are produced by the agency of such an instrument, and the following are amongst the most remarkable results. After enumerating various facts illustrative of the fundamental principles laid down, the paper from which we quote pro-

ceeds as follows :-

"Dead animal matter, brought into contact with the hand of the operator, or with any person or any number of persons forming a chain by holding one another by the hand, the one nearest the operator holding his hand, and the dead matter being put into the hand of the person most remote from him, almost immediately stops the movements produced on the instrument by the electric current. Mr. Rutter has, however, carried his discoveries still further; for he has ascertained, and is able to prove most unerringly, that nocuous matter, whether animal or vegetable effluvia, or miasms, or mineral or vegetable poisons-in fact, all substances capable of producing death-have the same power of stopping the action of the instrument, as I have just described dead matter to have. All the experiments were conducted in the most simple and unpretending manner, and were explained in the most lucid and unequivocal language. They were repeated over and over again, at the wish of several of the persons present, and the results were each time unvarying and unerring, so as to carry conviction to all who witnessed them, even the most sceptical.

"Another curious and interesting phenomenon was now demonstrated by Mr. Rutter. If a person of the female sex puts the index or fore-finger on the operator's hand, the pendulum, instead of moving as when the index of a male is in contact with the hand, from D to C, moves from B to A. When the female thumb touches the hand of the operator, instead of moving from B to A, as in the case of the male thumb, the pendulum immediately moves from D to C; and when the whole hand of a female is placed on the hand of the operator, the movement becomes circulatory in the direction of from B around to G—that is,

from right to left, the exact reverse of the normal motion.

"The next experiment was one of great interest, and exemplified in a beautiful and indisputable manner the experiment to which I alluded in a former part of the evening, viz., the instrument being stopped by the operator when put in contact with dcad animal matter. After having put the instrument in full normal action by applying the finger and thumb of the right hand, a dead fly being put in his left hand, the motion of the pendulum immediately ceased; on the fly being taken away, the motion recommenced. A chain of several men, holding one another by the hand, was formed; a female placed her hand on that of the man most remote from the operator; the motion of the instrument was immediately reversed, the circulatory motion being from right to left. A dead fly was then put upon the left hand of the female, and the motion immediately stopped.

"A wire of copper, 500 feet long, encased in gutta percha, was then added to the chain of men—the one farthest from the operator held one end of the wire, and the female the other end; the female influence was immediately sent through both the wire and the chain of men, and a corresponding action was again set up; which was again stopped immediately by the dead fly being put upon the other hand. Similar experiments were made with other dead matter; even merely by holding the hand over or near the dead matters, the aura of which equally stop-

ped the motion."

Another set of experiments were to prove the polarization of the body, which was readily demonstrated, as well as the perfect control of the operator over the direction or cessation of the magnetic currents, those currents, also, being subject to peculiar disturbances and variations in different parts of the body, and dependent on a vertical or recumbent position. Other extraordinary facts are related, which it would transcend our limits to specify; we must, therefore, proceed (only observing, in passing, that particular metals exercise a particular effect on the electric currents) to the sovereign assertion that in exact conformity with what was to be expected from the delicate experiments made with a dead fly, the hair of a female, the aura from dead matter, and other substances, it is boasted, with no small confidence of triumph, that this "brilliant discovery" had settled the question of the infinitesimal doses, employed in homeopathy, possessing influence. Accordingly, one globule of stamum of the fourth attenuation being placed in the palm of the hand of the operator after the instrument had been set in motion, the pendulum, it is said, went immediately moving with as quick and as strong a motion as when the same metal IN MASS was put into his hand. We are further informed of the precise effect of a great many globules of various poten-cies upon the movements of the pendulum. We cannot, of course, particularize many, but select one or two-e. g., a globule of zincum, thirtieth attenuation, sent the pendulum the same distance that was accomplished by the same substances of the 200th attenuation; while one globule ferrum metallicum 6, gave exactly the same elliptical motion as produced by the iron IN MASS.

But we must stop, and leave the verification or demolition of these startling assertions to those of the rival schools, who will, of course, make it their business—we trust in a philosophic spirit—to bring them to the test of the most searching experiments.

R. S.

Boston, Dec. 17, 1851.

#### CASE OF TRIPLETS.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—The following are the particulars of an interesting case, and if you think them worth publishing, you are at liberty so to do.

On the 25th of November I was called to a lady about to be confined with her first child. The first indication of being sick, was the sudden discharge of her waters. I was called about 10, A.M. She was

sitting up; her pains were very slight, and remained so through the day, till 5, P.M., when she was delivered of a daughter weighing 51 lbs. I soon attempted to take the after-birth, which I found to be fast, and on examining the bowels it was evident that there was another child. I did not succeed in removing the after-birth at this time. Her pains then entirely ceased. I remained with her till 6 next morning, when I left, with directions to send for me when her pains returned. At 5, P.M., 24 hours from the birth of the daughter, her pains returned. I was sent for, and found her comfortable, excepting slight pains, which continued of a lingering character through the night and the next day till 4, P.M., when I took 14 pint of blood from the arm. Her pains gradually increased till 6, P.M., 49 hours after the birth of the first child, when she gave birth to two sons, one weighing 6 and the other 51 lbs. I then took the three cords and removed the placenta without any trouble. The lady was then put to bed, and I left her comfortable, although somewhat reduced. She and all three of the little ones were doing well last Saturday, being the tenth day. The mother was able to sit up two hours on that day.

Respectfully yours, E. N. TUKESBURY.

Falmouth, Dec. 9th, 1851.

#### " A THORN IN THE FLESH."

#### BY J. R. WARDELL, M.D.

It is not very usual for medical men to be the historians of their own cases. At the suggestion of several professional friends, I now briefly narrate the particulars of a long and tedious illness, the progress and results of which may probably be read with some degree of interest, and the case considered as one of uncommon occurrence.

In May, 1850, I began to experience an aching pain at the lower part of the thigh, about a couple of inches above the inner condyle. Being at that time more than ordinarily busy in the discharge of professional duties, and consequently having an unusual degree of exercise, attributed the pain spoken of to some twist or strain I might have sustained, but which had been little regarded at the time, and afterwards forgotten, or to the simple effects of too much walking. A few days' rest, and riding to all my professional visits, gave relief, and I then thought little more of my lameness. Active exertion, however, soon reinduced it, and on examination I felt an induration, about the size of the little finger, lying as if in the sulcus between the vastus internus and the gracilis. Over this the skin was discolored with a slight diffused blush, and on pressure being made by the finger, the redness speedily returned.

Being one day at Mr. Benjamin Phillips's, I mentioned the circumstance of my lameness, and after showing the place to that gentleman, he recommended the application of iodine. This remedy did not, however, afford relief, and I every week became lamer. It may here be mentioned that at the time Mr. Phillips examined the part there was a good deal of boggy swelling above the knee, more especially at the inner aspect. Mr. Phillips particularly asked if I had sustained any in-

jury there at any previous time, as the case seemed somewhat anomalous, and perhaps the history of a former accident or affection might throw more light on the diagnosis. My reply was according to the present statement :- In the latter part of October, 1845, when leaping a hedge, my horse fell upon it, and although not unseated, I was aware I had sustained an injury above the right knee. On dismounting I could walk, yet still I was conscious that, from the feeling at the moment, something had given way. After riding home, which was some few miles, I was so lame I could scarcely dismount. My friend, Mr. Cole (Pickering, Yorkshire), examined the part, and it was the opinion of that gentleman, that there was laceration of one or more of the muscles; and this opinion proved correct, as even now there is a nodulated thickening felt crossing the course of the rectus, and especially when the limb is flexed. There was no external injury, with the exception of two or three slight scratches. Leeches, fomentations, afterwards cold lotions, and rest, reduced the swelling, and removed the pain. In the course of two or three weeks I could walk about pretty comfortably. From that time to May, 1850, I never wore a bandage, nor paid any

particular notice to the seat of my former lameness.

In June 1 became worse, and my professional duties were performed with more inconvenience. I called on Sir Benjamin Brodie, and had his opinion. At that period the pain was strictly localized, but there was still some degree of boggy swelling; the skin was pale and cool. Sir Benjamin recommended bandaging with vulcanized adhesive strapping, to encircle the lower part of the limb. This plan, on being pursued, was evidently unsuited to my case, as the heat, pain and swelling increased. When Sir Benjamin saw me again, he ordered the entire removal of the elastic bandages, and the immediate application of a dozen leeches, to be followed up with fomentations, and afterwards cold lotions and a general antiphlogistic regimen. I remained for several days in bed, and for two or three weeks gave entire rest to the limb. This mode of procedure afforded considerable relief, and I thought I might now venture to resume my duties. No sooner did I stir about than the described symptoms returned, with pain from the ankle to the groin. Leeches, antiphlogistic measures, and rest, were again employed, and, as on other occasions, with benefit. Several of my medical friends kindly called to see me, but unfortunately for the cure, all their opinions varied. Not being fully convinced—so far as medical consultations are concerned—that in a multitude of counsellors there is wisdom, I resolved to place myself under the care of one gentleman, to rigidly obey his injunctions, and abide by the result. Consequently I called on Mr. Travers, whose European reputation and long practical experience were a guarantee for whatever he suggested. Mr. Travers said he had known cases of an analogous nature, where inflammation of the muscles had been produced at that part, in sportsmen and others who were accustomed to be many hours on horseback; and he instanced two cases, where, from pressure against the saddle, not only inflammation, but suppuration, had been the consequence. He conceived that, from a sudden twist, there might have been a slight laceration, and finally a small secretion of matter, in the deep muscles. The swelling and pain having abated, Mr. Travers advised a mercurial plaster and moderately-applied bandaging. In the latter end of August I was so far improved that I was enabled to go to Yorkshire for change of air, and I remained three weeks. On my return my health was quite restored, yet still the induration spoken of, and the pain in walking, were not removed.

In the middle of October I was suddenly summoned to a lady in a fit. Her house was only two or three hundred yards from my own residence, but in the hurry I had, I felt, done mischief to the peccant part. On the following morning it was evident, both from increased sensibility and ocular inspection, that my troubles were about to return. I could not walk a hundred yards without pain. Mr. Travers now recommended blisters, which were re-applied to the third repetition. I desisted from all exertion, and sought once more, if possible, to be rid of so troublesome an affection. All the remedies which now, during four months, had been tried, had, it was too evident, been tried in vain; and on the 10th of November I found myself again in bed, not one whit better than I had been in July. On the 18th of November Mr. Travers again examined me, and very correctly observed, that as all the ordinary means had been adopted which an affection like the one under consideration appeared to demand, the only alternative remaining was to cut down and see that which was difficult otherwise to understand. To this proposition I cheerfully agreed. The 22d was proposed as the day for operation, and until that time I was to constantly keep it poulticed. Mr. Travers, Mr. Benjamin Travers, and Dr. Samuel Edwards, met for the purpose of making an incision into the part. Mr. Benjamin Travers cut down from an inch and a half to two inches, and then carefully dissected the deeper strata of muscles. On scratching open with the point of the scalpel an evidently distended bursa, a couple of drachms of slate-pencil-colored fluid welled from below. It was the opinion of the gentlemen present that this fluid, by being bound down by the deep fascia, would be sufficient to give rise to irritation of the periosteal covering of the femur, and inflame the adjacent white textures. On noticing the deep muscular tissue, it looked dark and congested, of a dirtyish-red color, evidencing the hue observed in chronic myelitis. The orifice was kept patulous by means of lint and poultices continually applied. After the operation, the pain was somewhat less, but by the 6th December the whole of the fascia lata of the thigh was inflamed. The wound now not looking so healthy as could be wished, Mr. Travers applied the caustic pretty freely; and as the pulse was soft and inclined to be quick, he prescribed quinine, a generous diet, and two or three glasses of port wine daily. After this, a teasing cough came on; I had also copious night sweats, and considerable debility was apparent. The pulse was soft, and now (December 15th) 120. The pain in the limb after this increased; the discharge was very considerable, the appetite impaired, and it was with difficulty that I could get out of bed without assistance. Dr. Edwards examined my chest, but the physical signs were not such as to give rise to any great anxiety. There was some degree of hyper-vesicular murmur, but as the percussion and other

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conditions were unaltered, Dr. Edwards rightly attached little importance to increased respiratory murmur. The emaciation and general excitability were sufficient to account for it. After this (December 22d), the mere exertion of coming down stairs to lie on the sofa was attended with such difficulty as to well nigh produce syncope. The cough continued incessantly; the night sweats were as before, and the pulse ranged from

115 to 120. I now remained entirely in bed.

Mr. Travers had become anxious as to the result. The whole of the inner condyle was so tender as to render the slightest touch painful, and every day rendered the emaciation more obvious. In that true spirit of kindness and interested concern which Mr. Travers had manifested from the first of his assiduous attention, he strenuously advised the total relinquishment of my practice, and recommended quiet lodgings at Brighton. With reluctance I consented to this proposition, and as soon as circumstances would permit, made my arrangements for departure, in the hope that change of air would do more than physic. When my servant was dressing the wound on the morning of the 8th of January, 1851, he observed a small dark point, emerging—not from the orifice of the wound—but several lines to one side of it through the healthy skin. When he had drawn my attention to it, I placed my finger upon it, and was surprised to feel a hard sharp body. I desired him to reach a pair of forceps, and to my utter consternation I withdrew a huge piece of hard black thorn, measuring exactly an inch and a half long. The bark had been absorbed, but in other respects the ligneous structure was unaltered. It soon occurred to me that it must have penetrated the thigh in October, 1845, when my horse fell in leaping the hedge, as I cannot call to remembrance any other time when such an accident could have occurred.

[Dr. Wardell's recovery was slow, but complete. The cough and night sweats, however, ceased in less than a week. We have not room for his additional remarks, as they appear in the London Lancet, from

which the above, with some omissions, is copied.]

# THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, DECEMBER 24, 1851.

Improvements in Surgery.—Modern surgery is indebted to our countrymen for some remarkable discoveries and improvements. It is needless to recount the contributions of American operators to the common stock of surgical knowledge. Were American surgeons careful to write and circulate in the periodicals their experience and discoveries, the aggregate would still more redound to the scientific character of the country. We are most of us too much in haste in the every-day routine of professional life to record the results of our daily observations. How will posterity ascertain our claims to the possession of scientific knowledge, if they are not permanently registered by those who alone are most competent to accomplish it? The Medical Journals have become the convenient and appropriate channels for widely disseminating the progress that is made, and all may profit by contributions made through them to the common

fund of medical intelligence. Information respecting surgical instruments, by means of which complicated ones may be laid aside and those which are simple substituted, is eminently important to be communicated to the profession. While great and costly apparatus commands corresponding attention, simple devices for accomplishing the same results are apt to be both undervalued and neglected, unless they are known to have

been successful in the hands of eminent operators.

These reflections were called up after examining a very economical plan, invented by Josiah Crosby, M.D., of Manchester, N. H., for maintaining permanent extension in fractured limbs. He attaches adhesive strips above and below the fracture, winding them round the limb. If the leg is to be kept extended, a strong strip of cotton is made fast to the circular one, on one side, by adhesive material, running towards the ankle. It is carried a few inches beyond the foot, and then returned up the limb on the other side and fastened in a similar manner. To the upper circular adhesive strip he confines something analogous to the arm of a crutch, to push against. One extremity of the board on which the leg rests is held firmly down, while the screw by which the extension is produced pulls upon the loop below the foot, that grasps each side of the limb. In this manner the surgeon avoids the necessity of drawing upon the instep -which is apt thereby to become extremely painful. No part of the limb feels more pressure than another; no cutaneous circulation is impeded by long-continued pressure, and many of the contingencies inseparably connected with any system of extension which requires a pressure upon the bones of the foot, hand, &c. are entirely avoided. A few days since we saw a patient under Dr. Crosby's treatment, and were struck with the value of the process. Any plan of extension which does not embrace this principle, it appears to us is defective. In particular cases of obscure or complicated fractures, Dr. Crosby would doubtless, on application, impart additional information respecting his plan; still he would greatly oblige the profession at large if he would publish something about it, however short it might be, as his experience in its use would give weight to whatever he might say in its favor.

First, Second and Third Books of Anatomy.—Three volumes, of different dimensions, well printed, and containing some very finely executed illustrations, for cheap elementary works, by T. S. Lambert, M.D., have been on our table several days, but the examination has not been sufficiently thorough to enable us to write our views of the author's plan or of the general merits of his writings. Were the public to read and reflect upon the momentous subjects of health, physiological laws, anatomical organization, and the goodness of God as displayed in the complex but beautiful structure of the human body, it would lead to the happies' results. If these treatises contain a moiety of those elevating considerations which were presented by Dr. L. in his popular lectures before very large audiences in this and neighboring cities, they cannot fail to be appreciated.

Infant Therapentics.—The second edition of a valuable little manual, by the late learned Dr. John B. Beck, of New York, has been sent abroad from the press of W. E. Dean, of that city, enlarged and improved. When the first edition, fresh from the hand of the author, appeared, while he was

living, the profession generally acknowledged its claims. This edition is actually better than the first. It is a safe guide, and cannot be otherwise than prized by those who study diligently its precepts and advice.

Hygienic Use of Alcohol.—An address by F. M. Robertson, M.D., on the medical and hygienic use of this potent stimulus, sent from Charleston, S. C., cannot receive the attention its merits deserve, for the present week. He writes well, and his tee-total reasoning is truly philosophical.

"The Excellent Woman."—This is the title of a work which is not professedly medical or even scientific in its character. But who can be more interested in the subject of which it treats than medical men? Presuming there can be no difference of opinion respecting the importance of cultivating the virtues and instructing the minds of those who give a tone to society and impart most of the moral elevation possessed by the race, the book bearing the above title, from the press of Messrs. Gould & Lincoln, a Boston publishing house, is recommended to the favorable consideration of our professional friends, and especially the unmarried ones.

Maine School of Medicine.—On Wednesday, February 11th, the annual lectures will commence at Brunswick, Me., and continue fourteen weeks. The lateness of the term allows students to take a second series of lectures the same season, which many are ambitious to receive. The fees are reasonable, and from the day of its organization to this, the institution has had an excellent reputation. We commend the advertisement to the attention of gentlemen who are proposing to avail themselves of the advantages the college offers, as it is specific in regard to the resources of the school, and the expenses neccessary to incur.

Low Temperature in New Hampshire.—A postscript to a letter received at this office from Franconia, N. H., dated Dec. 17th, says:—"We are having unmistakable premonitory symptoms of winter. The mercury now stands (half past 8, A. M.) at 18 deg. below zero; last Friday morning, at 22 below. We confidently expect to see the mercury frozen before many days. From present appearances, Franconia bids fair to maintain her reputation of 'being rather a cool place.'"

Medical Missionary Service.—The following gentlemen are under the patronage of the American Board of Commissioners for Foreign Missions. Newton Adams, M.D., located at Umlari, Africa; Henry A. Ford, M.D., at Baraka, Africa; C. V. A. Van Dyck, M.D., Hasbeiya, Syria; Henry A. De Forest, M.D., Beyroot, Syria; John Scudder, M.D., Madras; Charles S. Shelton, M. D., Madura; Samuel P. Green, M.D., Menepy, Ceylon; Dyer Ball, M.D., Canton, China; Charles H. Wetmore, M.D., Hilo, Sandwich Islands; Dwight Baldwin, M.D., Lahaina; Seth L Anderson, M.D., Kanal; James W. Smith, M.D., Kola; Elizur Butler, M.D., Cherokee Indians; Thomas W. Williamson, M.D., Kaposia and Dakota Mission. These are all well-educated, excellent practitioners, who are devoting their lives to a cause of the highest interest to the christian and the philanthropist.

Ovarian Dropsy .- The case so fully yet concisely reported by Dr. Parkman in to-day's Journal, will be found an instructive one. Although the complete success of the operation was hindered by a contingency which could neither be prevented nor foreseen, yet the otherwise correct diagnosis, the surgical skill, and the carefulness manifested in the previous and after treatment, are worthy of much commendation. The case is certainly entitled to rank high in interest among the recorded ones of this formidable operation.

Medical Miscellany .- A case of the celebrated Perkins's Tractors, which in the latter part of the last century performed such wonderful cures in this country and in England, has been sent to the editor of the London Lancet, who shows it to visiters as a curiosity, which it certainly is. The sender hopes that the day is not distant when a case of Hahnemann's infinitesimals will be as great a curiosity.-One thousand six hundred and seventy-three births were recorded in London, for the week ending October 25th-876 boys and 797 girls. The average number for the corresponding week for the six preceding years, was 1327.—The town of Boxford, Mass., is said never to have had a physician.—A new Medical Journal is to be published in East Tennessee, called the East Tennessee Record of Medicine and Surgery, Frank A. Ramsey, M.D., Editor.—An active demand is anticipated for Dr. Wood's Hints on the profession of medicine. It was published at Buffalo.-In a single century four thousand millions of human beings appear on the surface of the earth, act their busy parts, and sink into its peaceful bosom.-A Dr. De Lamater has announced his intention of practising physic, at Coshocton, by an advertisement commencing thus—"Who wants to see the doctor?"—Dr. Warren, senior, visits the Mass. General Hospital every Wednesday at 10 o'clock, A.M., and will be happy to see any of the profession who take an interest in surgery .- Dr. Campbell has been elected mayor of Charleston, S. C., and Dr. Elisha Huntington mayor of Lowell, Mass .- Dr. Clough, of Boston, is coming out with a small work on the preservation of the teeth .-The meeting of the Suffolk District Medical Society will be held as usual on Saturday evening next, at 71 o'clock.

To Correspondents .- W. S. C.'s remarks on the Preparation and Sale of Domestic Medicines, have been received.

MARRIED,—In Boston, William Henry Thorndike, M.D., to Miss Sarah W. Smith.—In Pompey, N. Y., Samuel Niles, M.D., of Niles, Michigan, to Miss J. Helen Jerome, of Pompey.—At Washington, D. C., Dr. Bernard M. Bryne, U. S. A., to Miss L. Abert.—Dr. D. C. Hadley, of Haucock, N. H., to Miss M. A. Haggett.

DIED.—At Churchville, Va., Dr. E. H. Gooch, 33.—At the Western Lunatic Asylum, Va., Dr. John H. Tompkins, 49, formerly of Richmond.—In New Kent Co., Va., Dr. R. N. Hall, 28, by the accidental discharge of a pistol.—In Brunswick, Va., Dr. John Field, 62.—In Hanover Co., Va., Dr. Nicholas Terrell, 49; Dr. J. P. Harrison, 46.—In New York, James Cameron, M.D., a native of Sectland, 66.—At Litchfield, Me., Dr. Sylvanus Waterman.—At Killingworth, Ct., Dr. Rufus Turner, 61.

Deaths in Baston—for the week ending Saturday noon, Dec. 20th, 62.—Males, 30.—femnles, 32. Inflammation of the bowels, 3.—bronchitis, 2.—consumption, 7.—convulvions, 3.—croup, 4.—dyspepsis, 1.—dropsy of the brain, 3.—drowned, 1.—exhaustion, 1.—brain fever, 1.—lung fever, 7.—disease of heart, 1.—disease of the hip. 1.—infantile, 6.—inflammation of the lungs, 2.—congestion of the lungs, 1.—marasmus, 4.—old age, 1.—snicide by poison, 2.—palsy, 1.—rheumatism, 2.—puerps. 1.1.—smallpox, 2.—teching, 2.—tumor, 1. unknown, 2.
Under 5 years, 27.—between 5 and 20 years, 7.—between 20 and 40 years, 14.—between 40 and 60 years, 7.—over 60 years, 7. Americans, 30; foreigners and children of foreigners, 32. The above includes 7 deaths at the City Institutious.

Phosphate of Lime in Consumption .- In the first number of the New Orleans "Monthly Medical Register," we find an article by Professor Stone on the virtues of "Phosphate of Lime in Scrofula, and other depraved states of the System," which is of some moment. It was suggested by an essay in the London Lancet, on the "physiology and pathology of the oxalate and phosphate of lime, and their relation to the formation

of cells."

"The conclusions of the author," says Professor Stone, "are based upon careful chemical research and results from the use of the remedy. His researches show that in man, as well as in vegetables and inferior animals, phosphate of lime, as well as albumen and fat, is absolutely essential for the formation of cells, and he considers that many of the pathological states of the system depend on a deficiency of this salt. The affections in which it is advised, are ulcerations dependent upon a general dyscrasia, and not a mere local affection; infantile atrophy, in those suffering from rickets, and consequent diarrhoa and tuberculous diseases, particularly of the lungs in the early stages."

Struck by this article, Prof. Stone tested it, and he thus describes three cases in which its virtues were very obvious. The first was that of a slave, who was admitted to the Professor's Infirmary in July, with a disease of the nose, the whole system showing great progress in scrofulous decay. The usual remedies were unsuccessfully applied until August, when cod-liver oil was used, but the disorganization of the stomach was increased by it. The phosphate of lime was then applied—eight grains three times a day. Its good effects were soon apparent. It and the oil were therefore administered together, and the patient was soon restored to health.

The second case is that of a young lady, aged 24. Her disease was one of "unmixed phthisis, which might have been expected to terminate in the course of a few months" fatally. The upper part of both her lungs was filled with tubercles, and in some places was beginning to sof-The case was evidently a bad one. The treatment of cod-liver oil was at first used, but without marked improvement. The phosphate of lime was then administered with the oil, and the result, as in the case of the negro, was soon apparent. The patient was rapidly getting well.

The third case was that of a child seven years of age, in which the

phosphate of lime was used with complete success .- N. Y. Med. Gaz.

A New Quackery .- In Naumberg a man named Mahner is preaching the necessity of a new regeneration, not in the spiritual, but physical sense. He warns a sickly race that it must return to the lost state of "primitive health," or Urgesundheit, as the means of more fully enjoying life and attaining a patriarchal old age. It is to be secured by a diet of bread and water, going barefoot, and letting the hair and beard grow; in short, making a nearer approach to man's original state in costume than the decencies or prejudices of modern society will altogether permit. On this topic he has been lecturing to a chosen few, but his doctrines do not seem to take, bread and water not being tempting, even with four-score years promised as the prize of self-denial. The German journals are peretually turning up some eccentricity of this sort. A section of the public seems determined to escape the hands of the faculty, and die by some irregular process, rather than with the aid of medicine.-London Lancet.

## MEDICAL JOURNAL ADVERTISING SHEET.

TREMONT STREET MEDICAL SCHOOL—
Is BOSTON, OVER 33 TREMONT ROW.—The sanual course of instruction in the Tremont School commences this year on the first day of September.
This School was instituted in Boston, in 1888, for the same of Instruction, by lettures and examinations, throughout the year. Two hundred pupils, including large and to the recent academic graduates of Harvard University, who have devoted themselves to the sady of medicines, and many others from all sections as the same of the

on the subjects of the lectures.

The following gentlemen are instructers in this school, during the present year, in the several departments of medical science, forming a complete and therough course.

Jacob Bioglow, M.D.

J. B. S. Jacasson, M.D.

Oliver M. Holling, M.D.

DANUEL CASOT, M. J.

BANUEL C

Practical Anatomy is taught under the immediate direction of the Teacher of Anatomy and 1 hydrology, assisted by the Demonstrator of the Medical School of the University. Ample means of pursuing this important branch of study, and for the practice of the more important surgical operations, are provided without additional expense to the student.

This essential branch of a medical education is made an object of especial attention. There will pital, in the Medical period of the pital, in the Medical Department, by Drs. Bigelow, packs an ad Storer, with Lectures at stated intervals; and constant attention to the practical study of period of the production of the practical study of the period of the Medical Department of the Hopolial. Clinical instruction in Surgery will be given at the same institution by Dr Henry J. Bigelow.

Ample opportunities are afforded for experience in Obstettic Public Institution of the Medical Insti

in Obstetric practice.

In addition to the medical and surgical practice and operations to the medical and surgical practice and operations of the property of

permission of Dr. Durkee.

RANS OF ILLUSTRATION.

The large collections of healthy and morbid specimens in the Warren Anatomical Museum, and the Cabines of the Boston Society for Medical Improvement. Will be made available for the purposes of instruction under the direction of Dr. Jackson, the Curator of both these collections.

During the whole Summer term, the Students of the Tremont Street Medical School will have free access to, and the privilege of taking Books from the Library of the Massachusetts Medical College, now consisting of about 1500 volumes, and rapidly increasing by a large annual appropriation, devoted to the Student.

o'me content.

\*\*Application may be made to Dn. Bioglow, 
bunners street, Boston. A new Catalogue of the pust 
burners between the Scheck, with other deman description of the pust 
Mr. Burnett. Apothecary, 33 Tremout Row, at W. D.
Ticknor's Bookstore, or at the Med. Journal Office.
The Room of the School, at 33 Tremont Row, over 
N. Burnett's Apothecary afforce, is open to Students 
from 5 A. M. to 10 1 "M., formished with Plates, Preparations, Articles of the Materia Medica, Serparations, Articles of the Materia Medica.

For the Summer Term (from March lat to November lat), \$39. For the Winter Term (from November lat to March lat), \$40. For a Year, \$400. Boston, August, 1551.

MITH & MELVIN'S LIQUID EXTRACT OF SMITH & MELVIN'S LIQUID EXTRACT OF OPIUM—Containing att the desirable Alkafosis of Opium—in—Containing att the desirable Alkafosis of Opium—in—Containing att the desirable Alkafosis of Opium—in—Containing attention of the alkafosis of and readered permanent—The want of a uniform preparation of Opium which should take the place of Laudanum, as usually prepared, has been long treating the source of the containing the containin

April 9. SMITT & MELTING Apparent Control of the Co

CITY OF BOSTON.—City Physician's Office and Tyaccine Institution, No 21 Court Square.

Ty Hour for Vaccination, from Tweete to One o'clock, daily.

Residence 35 Salem Street.

March 12—coptf

NAPHTHALINE.—A new remedy highly recom-mended by M. Dapesquier, M. Rassignon and M. Emery, in various pulmonary complaints. Manu-factured and for sale by PHILBRICK, CARFEN-TER & CO., Chemists, 160 Washington street, Boston. 817

CHIRRETTA—A new Anti-periodic, just received by PHILBRICK, CARPENTER & CO., 160 Washington street, Boston.

PRESH AND GENUINE DRUGS AND MEDI-CINES of a Isuperior quality, carefully prepared for physicians' use, and for sale on the most favorable terms, at 33 Tremont Row, Boston, by JOSEPH BURNETT, Feb. 10—tf (Successor to T. Metcot).

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at this office, and at 31 and 32 Cornhill. Each book
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Not. 30.

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THROAT INSTRUMENTS—Much inquiry be-ing mude for the subscriber's instruments, ho bests to give notice that they may be had at his office at the grices annexed Larynteed, Pharyngeal, and Nasad Shower Styringes, three in one next cases, §10; new and eleç at Tonad instrument, §10; Powder Hishier, §1. Also, powders of Nil. Siver, Sulph. Copper, Cryst. Nil. Mercury, &c. or inhalation, 30 Copper, Cryst. Nil. Mercury, &c. or inhalation, 30 Special and A reasonable discount at wholessie. Special and Company of the Copper of the Copper and Langs. Botton, No. 1 Winter Place. and Lungs.
Boston, No. 1 Winter Place.

PRECIPITATED PHOSPHATE OF LIME.— This new remedy for scrofula, &c., manufactured and for sale by PHILBRICK, CAPPENTER & CO., Chemists, 150 Washington st., Boston. Dec. 17.

PURE COD LIVER OIL.—The true medicinal Cod Liver Oil, prepared expressly for our taske, and warranted equat to any in the market. For sale wholesale and retail by PHLBRICK, CAPPEN-TER & CO., Chemista, Boston. Dec. 17.

NEW UTERINE SUPPORTER—Invented by P. Rontssov, and far superior to his Improved Pessary—not liable to break nor corrode—small, worn with case, can be applied by the patient, and nauwering all purposes, acher mechanical support is needed. It has been examined, approved and used by many physicians. All are invited to call and examine it. Sold may be a provided to the provided provided to the provided provided to the provided provided

MicROSCOPES,—Joseph Burnett, No. 33 Tre-mont Row (Agent for the sale of Soencer's Microscopes, has just received two instruments from this celebrated maker, which he offers for sale Also, it full assortment of Alexander Heth's Pre-parations of Microscopic Anatomy. Je25—II.

SARATOGA POWDERS—or Rochelle, Seidlitz,
S and Soda Powders, one package equal to six
boxes of the above—price 5 cents. These will be
found a great convenience to travellers, seven we
a convenience to travellers, seven as
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Museum.

Museum.

MATICO.—A fresh supply just received and for sale by JOSEPH BURNETT, No. 33 Tremont Mch 17—11

PURE CHLOROFORM.-For sale by JOSEPH BURNETT, Apothecary, No. 33 Tremont Row. Jan. 5-4f

DR. HEATON'S HERNIA INFIRMARY, BOSTON,—Dr. H. having returned from Europe, will receive patients as formerly. He continues to attend particularly to the nature and speedy cure of Hernia or Rupture, Varicoccie, Rectoccie, Hydroccie, &C.; also to discusses of females. Trusses are dispensed with in all cases.

Applications must be made at his office and residence, 2 Exeter Place, Booton.

July 24.

TO PHYSICIANS.—A Physician located in a thriving community, twelve miles from Boston, wishing to leave the State, would relinquish his practice to any physician of experience, on reason-ble terms. The absence of competition and the stealy growth of the place render it a most desirable country. For location, &c., apply at this office. Dec. 10—4 theory.

NOTICE.—A good chance for a good Physician, in a flourishing village, with a business of about \$1.20 per year; fifteen miles from Boston by railroad. Inquire at this office for particulars.

Dec. 10—eptf.

RARE CHANCE FOR A PHYSICIAN.—A physician in Maine, with a practice of \$2,500 a year, offers to sell out on reasonable terms. Apply at this o.i.ce. N19—tf.

FO3 SALE,—The ride of a Practising Physician, worth 1,430 per annum. The incumbent wishes to sell horse, buggy, office flutters, &c. Possession given immediately. For further particulars, inquire of R. P. JENNESS, Saccarappa, Maine. Octs—17

E NGLISH HERBS.—Leaves of Hyosciamus, Beladonna, Conium, Digitalis and Aconite, for saby PHILBRICK, CARPENTER & CO. Nov. 13.

DR. H. W. WILLIAMS has removed to No. 32 Particular attention given to Diseases of the Eve. Nov. 5-eptf.

DR. J. V. C. SMITH, EDITOR of this JOURNAL, may be found at his Odice, in the basement of the Tremont House, Tremont Street. Nov. 5.

DISEASES OF THE EYE AND EAR.—Dr. J. II. DIX will, from this date, relinquish general pertice, and attend exclusively to the medical and surgical treatment of Diseases of the Eye and Ear. Tremont street, opposite Tremont House.

February 14, 1843. eptf

DENTAL AND SURGICAL INSTRUMENTS.—
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CUEVATURES AND DEFORMITIES—in the CS joine, Hip or Limbs, corrected and supported by our improved Anatomical Supports, which are constructed on scientific principles, being invasible and of great support, and do not prevent the patient from taking exercise. Also, Spring Instruments and Boots for Club Foot, Bow Legs, &c., in children or adults, 17 These articles sent to any part of the Union or 27 These articles sent to any part of the Union or 27 These articles sent to any part of the Union or 27 These articles sent to any part of the Union or 27 These articles sent to any part of the Union or 27 These articles sent to any part of the Union or 27 These articles sent to any part of the Union or 27 These articles sent to any part of the Union or 27 These articles sent to any part of the Union or 27 These articles are 27 These articles are 27 These articles and 27 These articles are 27 These articles are 27 These articles and 27 These articles are 27 These articles and 27 These articles are 27 These articles and 27 These articles are 27 These articles and 27 These articles are 27 These

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sure of the patients to be taken around the patients inches.

Reference may be had to the following physicians in Boston, among others, who have had practical knowledge of its utility:—Drs. John C. Warren, W. Channing, Geo. Hayward, J. Ware, E. Reynolds, pr., J. Jeffries, J. V. C. Smith, W. Lewis, Jr. J. Homans, J. Mason Warren, &c. Tuctions for applying the same, will be furnished and exchanged until suitably fitted, by application personally, or by letter, (post-paid) to

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Jan. I.-lan.

#### THE

# Boston Medical and Surgical Journal

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